<u>Walter Reed Army Medical Center (WRAMC) information management and information technology (IM/IT) MISSION/VISION</u>

Provide accessible, reliable, and accurate information systems that respond in a customerfocused manner to the needs of the Walter Reed Army Medical Center (WRAMC).

GOALS & OBJECTIVES

WRAMC Directorate of Information Management (DOIM)/Information Management Division (IMD) Goals

- 1. Maintain an information enabling architecture in support of current and future mission
- 2. Complete protection of information system integrity
- 3. Timely resolution of customer/user issues
- 4. Maximum support of core business practices
- 5. Evaluation and optimizing of resource utilization
- 6. Continual collaboration to accomplish military medical readiness

WRAMC DOIM/IMD Objectives

- 1. Provide total information support for military clinical business
- 2. Deliver accessible, reliable, and accurate information
- 3. Improve hospital information availability
- 4. Leverage effective and adaptable medical care
- 5. Operate and maintain hospital administrative systems and networks
- 6. Standardize high quality office automation (OA) systems
- 7. Coordinate standard, reliable, and responsive centralized customer support services
- 8. Train clinical and administrative customers
- 9. Sustain integrated and timely communications
- 10. Integrate customer business, functional, and technical requirements
- 11. Support IM/IT initiatives, operations, and maintenance with IM/IT budgets
- 12. Devise decision maker collaboration operations, IM/IT, finance, and human resources
- 13. Promulgate IM/IT policies
- 14. Promulgate automation security policies
- 15. Promulgate contingency planning and emergency preparedness policies
- 16. Provide consultation support for non-integrated IM/IT systems and services

Walter Reed Medical Center Vision

Provide the Nation's most effective population-based primary and specialty military health care for soldiers, other service members, families and retirees in the National Capital area. Serves as the pre-eminent Federal medical center for worldwide referral care, clinical education and clinical research.

WRHCS / WRAMC Hospital STRATEGIES

- 1. Develop leadership in clinical readiness for combat and contingency missions.
- 2. Exploit advances in wellness, prevention and disease outcomes management for maximum quality of life and health.
- 3. Serve as the Army's center of gravity for complex care, clinical education and clinical research.
- 4. Become the national leader in outcomes-focused integration of primary and specialty care.
- 5. Partner with other services and agencies to promote excellence in military health care with prudent stewardship of resources.

SUMMARY

Information Management and Information Technology (IM/IT) for the Walter Reed Army Medical Center (WRAMC) develops and maintains an integrated set of IM/IT products and services that support clinicians and administrative staff of WRAMC as they serve patients and their families. This WRAMC Strategic Plan is the keystone integration plan for technology support products and processes based on WRAMC business functions and requirements.

The Assistant Chief of Staff for Information Management (ACSIM) for the North Atlantic Regional Medical Command (NARMC) is the Chief Information Officer (CIO) responsible for WRAMC IM/IT products, policies, and procedures. ACSIM directs WRAMC IM/IT toward standards-based systems by executing this strategy to integrate hardware, software, and communications assets through cost effective acquisition, deployment, and maintenance processes. The IM/IT organization paradigm coordinates support for rapid change in IM/IT requirements for information entry, storage, transmittal, and retrieval based on mission priorities.

ACSIM leads the WRAMC Directorate of Information Management (DOIM) to implement IM/IT policy in support of all WRAMC departments. ACSIM specifies, communicates, and implements best-of-breed products, processes, and formats. ACSIM recommends IM/IT priorities to the WRAMC Commander and is responsible for linking with medical, and garrison command structures and priorities to coordinate enterprise vision, mission, goals, objectives, and priorities with IM/IT resources. A single IM/IT command hierarchy directs the application of IM/IT policies and procedures throughout WRAMC resulting in a single prioritized schedule of IM/IT milestones and suspense dates.

ACSIM is assisted by the Deputy ACSIM for NARMC, the WRAMC Chief Technical Officer (CTO), the WRAMC Director of Information Management (DOIM) and the WRAMC Information Management Officer (IMO) to align and implement prioritized objectives to accomplish local and centralized needs. ACSIM charges the CTO, the DOIM, and the IMO with coordinated implementation of WRAMC IM/IT strategic and action plans as well as branch Standard Operating Procedures (SOP) for all technology core competencies.

ACSIM, through the CTO, DOIM, and IMO ensures the efficient and effective management of IM/IT personnel, property, contracts, and time to provide clinical and sustaining base mission and administrative IM/IT support. Branch managers are the

government/military subject matter experts (SME) assigned to lead IM/IT personnel assigned to core competency areas in support of WRAMC customers and systems.

These managers are responsible for carrying out the aligned vision, mission, goals, and objectives through IM/IT. They are the IM/IT Management team and tasked to maintain system functionality, manage and track technical projects, and record and track performance, workload, and effective resource utilization. ACSIM promotes and develops supervisors and SME through task delegation, recognition of technical merit, and avoiding micromanagement. The IM/IT Management Team ensures the efficient and effective utilization of IM/IT personnel, property, contracts, and time to integrate high quality mission and administrative support.

CORE COMPETENCY PROCESSES

Infrastructure Management

The Network Management Branch (NTWK) has the responsibility to provide information throughput for WRAMC customers. NTWK planning fosters standard automated processes for technical configuration, integration, maintenance, and troubleshooting. NTWK processes provide a robust local area network (LAN) that supports WRAMC automated information systems (AIS) in a customer-focused manner. NTWK acquires automation enhancements to coordinate workload and personnel so as to increase information processing consistency, efficiency, and speed. Training, development, and certification requirements define critical LAN administration and engineer qualifications.

An integrated LAN connected to a wide area network (WAN) and to the internet (NIPRNET) provides internal and external information as required for the WRAMC mission. NTWK software administrators and engineers ensure software quality and function. NTWK hardware engineers support information systems and throughput. A contingency of operations plan (COOP) ensures there is no critical single point of hardware, software, communications, or data failure, and that an integrated recovery from any system failure can be accomplished within acceptable time standards. Uninterruptible power supplies (UPS) provide continual level electric power for all data center systems and for critical and essential information delivery to IM/IT customers.

Current NTWK projects continue V-LAN expansion, real time capacity monitoring/correction, automation modernization, consolidation, and re-engineering, fiber optics and UPS implementation.

The CTO through the Strategic Planning Activity (SPA) ensures that service integrity is inspected and evaluated regularly to report information throughput, consistency, and validity. SPA also assists NTWK to monitor and evaluate automation improvements, resource utilization, personnel workload, and customer satisfaction through metrics.

Security

The mission of the information systems security office (ISSO) is to provide a robust information security infrastructure that supports WRAMC programs, data, and communications. This office has the responsibility of accrediting the local area network (LAN) and all mandated systems on that network.

The ISSO shall establish/update IM/IT security policies and procedures in a customer-focused manner. The ISSO is responsible for acquiring and deploying technical security systems to include configuration of a firewall and Internet monitoring software. All WRAMC LAN workstations will be configured to run the current Microsoft NT operating system and use a 128-bit encryption Web browser for patient data security. Plans for biometrics control of access to critical areas hospital-wide will be implemented.

Physical security of automated equipment will be evaluated for consistency and effectiveness. In recording and tracking its workload, the ISSO quantifies security training, encryption, virus detection/repair, unauthorized/malicious activity, and in/out-processing. The ISSO will also track and report on security upgrade projects.

Customer Support

The mission of Customer Support is to provide timely and complete customer service to the customers and users of the WRAMC LAN and AIS. The Customer Support Branch has the responsibility to respond to customer needs with high quality service based on industry standard quality and automation criterion. Customer service implements a help desk that is managed according to recognized benchmarks and best-of-breed solutions.

Customer Support shall engineer and deploy a digital automated call distribution (ACD) system, and will through the CTO, expand this system to incorporate all DOIM branches. Customer Support upgrades standardization, automation, and performance through statistical analysis of inductive/deductive metrics. Customer contact and support will be facilitated by web-based solutions.

In recording and tracking its workload, Customer Support quantifies work requests, customer contacts, level 1, 2, and 3 support and customer satisfaction.

Policy Development/Implementation

The mission of the SPA is to promulgate quality long range plans that coordinate the implementation of accessible, reliable, and accurate information and communications systems. The SPA through the CTO will develop process/performance improvement plans to assist IM/IT leaders and managers to promulgate policies that foster internal and external cooperation at streamlining WRAMC IM/IT functions. SPA develop planning and process improvement liaisons by coordinating through the WRAMC chain of command and by partnering with WRAMC process improvement efforts to include the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) Continuous Survey Readiness Workgroup, the hospital Governing Board, the Internal Review Team (IRT), and the Commercial Activities (A76) management office.

SPA also promote interpersonal and intra-group communications among WRAMC opinion leaders through proactive support of Consideration of Others (CO2), Equal Employment Opportunity (EEO), and Total Quality Management (TQM). SPA is responsible for complete communication to foster cooperation and closure among all WRAMC partners. All WRAMC views must be taken into account in development of standardized plans; these plans will be documented and become signed, supported, implemented, and promulgated policies.

In recording and tracking its workload, SPA quantifies planning/analysis/research, policy development, reports/formal correspondence, and meetings/conference call participation.

Resource Management

The mission of Resource Management (RM) is to provide quality resource acquisition products, plans, and logistics to support prioritized implementation of a robust infrastructure and customer support for WRAMC information systems, programs, data, and communications. The systems acquisition area has the responsibility of prioritizing and allocating funds to upgrade IM/IT resources in support of WRAMC military medical requirements. System and program resources are integrated and optimally utilized. ACSIM delegates the responsibility to RM to acquire efficient, dependable, and interoperable management information systems (MIS), programs and data that provide for quick adaptation to change.

IM/IT program managers, project managers, product managers, and executive agents must maintain compliance with acquisition policies, specifications, and standards. Market analyses study MIS systems and objectively evaluate function, response, and performance to ensure that purchases are cost-effective. ACSIM coordinates with functional users, system developers, systems maintainers, resource managers, and trainers to proactively contribute and buy into deployment decisions made.

ACSIM enforces adherence to a single integrated strategy for configuration management (CM), validation, and authentication of all IM/IT resources; system analysis and upgrades; requirements verification and prioritization; and standard models to foster communication and closure. RM conducts needs analysis to match limited available resources with mission priorities. RM tracks resource utilization from acquisition to removal/replacement, and of reports resource utilization through metrics. RM assesses current assets by collaboration with the ACSIM, CTO, IMO, and DOIM branch chiefs in order to achieve cost-effective solutions.

In recording and tracking its workload, Resource Management quantifies the following categories: Planning/Analysis/Research; Data/Database Administration; Contract Management; Work Requests; Formal Correspondence/ Reports; Property Management; Personnel Management; Time Management; Mission Support (Admin/Clerical); Mission Support (Technical); Mission Support (Physical); and Meetings/Conference Call Participation.

TELEMEDICINE

The Telemedicine Directorate at Walter Reed (TMED) provides clinical consultation to remote medical. They leverage cutting edge technology to provide and sustain clinical based programs to our customers. The Directorate of Telemedicine develops, deploys, and sustains a low-cost virtual healthcare network throughout NARMC. This network integrate healthcare providers and services, information systems, and communications technology to:

- Increase Tri-service collaboration;
- Develop clinical protocols and procedures;
- Build formal training and education programs (distance learning); and,
- Integrate healthcare delivery systems into daily operations

WRAMC is staffed with a wide spectrum of sub-specialty healthcare providers readily available to provide clinical consultative support. A distributed medical informatics network provides the necessary platform for ongoing consultation and medical education. Telemedicine maintains an active research and development program to exploit new capabilities. Telemedicine is a part of the NARMC/WRAMC military readiness mission and includes a fully deployable satellite based system.

TMED uses a broad range of clinical applications, both real-time and store-forward technologies, to enable consultative support to remote sites. Image capturing devices, such as digital cameras and Video teleconferencing (VTC) equipment, are used to acquire clinical images. These images are transmitted to Walter Reed where consulting specialists review and provide consultative advice to the referring physician.

The Medical Command, Control, Communication and Telemedicine (MC3T) Special Medical Augmentation Response Team (SMART) is a fully deployable emergency medical response component that provides assistance in response to worldwide disasters. The MC3T SMART provides assets to the other WRAMC SMART teams and emergency care providers in a disaster scene.

STRENGTHS, WEAKNESSES, CURRENT STATUS

WRAMC weaknesses are regularly addressed by internal and external managers and leaders. It is important that continuity be gained through written, supportable strategic plans enforced through multiple command changes.

Multiple command hierarchies and their incumbent directives and policies compete to lead WRAMC personnel. WRAMC military leadership rotates at least every three years; historically, at least once every year, a major leadership change results in reallocation of assets based on changes in priorities and proactive efforts to improve.

WRAMC strengths:

- 1. Geographic location: near the Pentagon, Congress, and other federal agencies;
- 2. World-renowned reputation as center of excellence in medical knowledge;
- 3. Recognized quality military medical information infrastructure;
- 4. Upgraded data center highly capable of complex change to include modernized UPS;
- 5. Integrated customer support;
- 6. Quality personnel are accustomed to planning and change.

WRAMC IM/IT weaknesses:

- 1. Incompatibility of legacy and stovepipe systems;
- 2. Lack of database standardization;
- 3. Insufficient redundancy in infrastructure;
- 4. Insufficient bandwidth to support future requirements;
- 5. Lack of centralized accountability of distance learning, web development, and VTC core competencies;
- 6. Insufficient implementation of network enterprise management for automated reaction to throughput deterioration;
- 7. High personnel turnover;
- 8. Incomplete information security;
- 9. Inadequate help desk automation and standardization.

IM/IT GAP ANALYSIS:

Successful gap analysis requires a clear understanding of the current state and the desired state. The gap is the difference between these defined as phased initiatives to fill the gap. Managers decide how to balance what could be done, with what can be done, with what should be done, with what the organization wants to do. Analysis defines opportunities, priorities and what business, functional and technical outcomes define successful achievement of the desired state. Diagnosis and planning are the key stages in project management. All projects that have failed missed key features in these areas.

It is always more cost-effective to get a project right first time than to try to recover a project in difficulty. It may be necessary to backtrack, with obvious implications for cost and schedule. Loss of momentum and credibility may also be an issue. Some apparently innocuous decisions can have a powerful effect on a project's cost and chance of a successful result. For this reason, we strongly recommend that consultant support be brought in before those decisions are made.

| | | CURRENT STATE | DESIRED STATE | GAP |
|---|--------|--|---|---|
| 1 | Infras | tructure ManagementMaximizing the information | enabling architecture. | |
| | 1.1 | Multiple single-point-of-failure situations exist throughout WRAMC critical systems. | | Acquire and deploy storage area network (SAN) technology. |
| | 1.2 | There is insufficient telecommunications throughput between the main WRAMC campus and Forest Glenn low quality cable connectivity. | A complete fiber optics system is in place to provide required bandwidth throughout WRAMC. | Deploy high quality fiber optic connection between the main WRAMC campus and Forest Glenn. |
| | 1.3 | Incomplete fiber optic implementation exists throughout WRAMC systems. | A system is in place to provide fiber optics and needed throughput throughout WRAMC. | Deploy fiber optic cables as backbone in each campus building. |
| | 1.4 | No wireless trunking exists in WRAMC. | A system is in place to provide wireless trunking throughout WRAMC. | Complete wireless telecommunications project ongoing with DOL-CE collaboration. |
| | 1.5 | No telecommunication base stations exist at WRAMC. | A system is in place whereby wireless base stations support communications throughout WRAMC. | Deploy wireless telecommunication base stations according to a specified plan. |
| | 1.6 | There is insufficient desktop VTC capability to support WRAMC leadership. | An adequate supply of desktop VTC is installed to support the leaders and planners in WRAMC. | Devise and implement a desktop VTC deployment plan. |
| | 1.7 | No secure VTC exist in support of critical WRAMC mission. | An adequate supply of secure VTC is installed to support critical WRAMC missions. | Devise and implement a secure VTC deployment plan. |
| | 1.8 | User connections are not fully functional in WRAMC. | A system is in place whereby LAN bandwidth supports mission requirements of all WRAMC systems and customers. | Conduct regular and systematic throughput evaluation. |
| | 1.9 | User throughput is not concisely and sufficiently reported. | | Report monthly throughput evaluation to the SPA IAW WRAMC Governing Board standards. |
| | 1.10 | There is insufficient bandwidth deployed in support of WRAMC critical systems. | A system is in place to seamlessly connect all LAN users to the communication systems they require. | Complete WRAMC LAN GIG-E implementation to 1000 megabits per second (MBS) capacity. |
| | | dependent on a patchwork of asynchronous transfer method (ATM) and frame relay technologies. | A system is in place to integrate ATM and frame relay technologies and reconcile interface issues. | Implement a single network architecture plan okayed by WRAMC LAN engineers, TIMPO, and DISA. |
| | 1.12 | No SIPRNET connections exist in support of WRAMC critical information. | A system is in place to ensure that SIPRNET connections support WRAMC critical information. | Implement WRAMC SIPRNET connection. |
| | 1.13 | UPS weaknesses in critical WRAMC hub/switch rooms are not adequately addressed. | A system is in place to ensure implementation of a complete WRAMC contingency of operations plan (COOP) to include emergency and uninterrupted power supply (UPS) support for critical and essential systems. | Provide a technical analysis of emergency power requirements for Bldg 2 to include UPS for hubs and switches. |

| | | CURRENT STATE | DESIRED STATE | GAP |
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| 2 | Secur | ityProtecting the integrity of the information sy | ystem. | |
| | | Lax physical security authorizes too many personnel access to sensitive areas. | Strict security protocols manage a short list of IM/IT personnel who are allowed specified access to information and locations. | Upgrade and implement robust policies for IM/IT physical security. |
| | | Substandard IM/IT LAN and systems security policies and procedures exist throughout WRAMC. | IM/IT security policies are fully promulgated throughout WRAMC pertinent to Internet, E-mail use, password issuance, administrator rights, and virus detection/protection. | Systemize articulation of current DoD and DA IM/IT security standards. |
| | | WRAMC LAN and automated information systems (AIS) accreditation are not up to date. | | Upgrade accreditation of the WRAMC LAN and each mandated AIS IAW DoD and DA security regulations. |
| | | The WRAMC COOP has not been promulgated. | A standardized COOP is promulgated and enforced throughout WRAMC. | Promulgate a WRAMC COOP training manual. |
| | | No coordination or methodology is in place for the WRAMC DOIM to quickly acquire state-of- the-art security control equipment. | | Implement a security acquisition strategy. |
| | 2.5.1 | WRAMC does not have a firewall. | WRAMC has an effective firewall. | Deploy a firewall. |
| | 2.5.2 | WRAMC does not have an encryption system. | WRAMC has an effective encryption system. | Implement an encryption system. |
| | | WRAMC does not have internet monitoring software. | WRAMC has effective internet monitoring software. | Deploy internet monitoring software. |
| | 2.5.4 | WRAMC does not utilize biometric equipment. | WRAMC has effective biometric security equipment. | Deploy biometric security equipment. |
| | | Outdated ADP security training exists in WRAMC. | , , , | Conduct automation security training for all ADP users IAW DoD standards. |

| | | CURRENT STATE | DESIRED STATE | GAP |
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| 3 | Custo | mer SupportResolving customer issues in a t | imely manner. | |
| | | ACD system, which result in varying response quality. | A system is in place to ensure an ACD system using digital technology reduces wait times and provides automated responses and metrics. | Implement standardized upgrade of customer call distribution support. |
| | 3.2 | validity to effectively monitor quality, customer | A system is in place to employ standard metrics and inductive/deductive logic to gauge quality, customer satisfaction and workload. | Enforce high-quality customer service policies. |
| | | phone numbers. | A system is in place to ensure standard call distribution with one well-staffed and seamless phone contact number for all IM/IT customers. | Centralize all IM/IT customer support functions under a single control. |
| | | personnel with varying certifications provide varying degrees of service quality. | and uniform service by competent personnel validated by objective evaluation criteria. | Provide a listing of all system administrators and LAN engineers that includes their certificates. |
| | | | service training and product information. | Provide Distance Learning Center (DLC) training and certification of all IM/IT technicians, administrators, and managers. |
| | | intensive, resulting in turn-around times that are long, variant, and difficult to manage. | A system is in place to ensure automated system monitoring, analysis, and maintenance tools to result in reduced turn-around times and high customer satisfaction. | Deploy and implement automated LAN monitoring system. |
| | | | A system is in place to ensure secure and rapid promulgation of critical system information. | Deploy Web-browser intranet system. |
| | 3.8 | | | Implement a standard system for automated client/server software distribution. |
| | | Customer office automation (OA) requirements are provided by COTS products and local unique systems with varying degrees of standardization and quality. | A standard set of OA systems is in place to meet specific customer requirements. | Implement standard set of IM/IT product solutions that provide quality and compatibility. |
| | | damaged configurations, unauthorized or | | Provide Distance Learning Center (DLC) MS Office and MS Outlook training and certification of all IM/IT customers. |
| | | update, and configuration is inordinately high. | control. | Implement a standardized system to manage workstation software. |
| | | | A system is in place whereby LAN maintenance is accomplished using benchmarked methodology. | Train IM/IT technicians in industry repair and maintenance standards. |

| | | CURRENT STATE | DESIRED STATE | GAP |
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| 4 | Policy | Development/ImplementationIdentifying and | designing core business practices. | |
| | 4.1 | There is uncertainty as to which current IM/IT policies support which core business practices. | A system is in place to continually prioritize the list of IM/IT policies that support core business practices. | Promulgate a complete listing of current IM/IT policies, plans, and regulations. |
| | 4.2 | There is incoherent development of policies. | A system is in place whereby IM/IT has a standard process for policy promulgation and enforcement. | Develop a standard process for implementing policies. |
| | 4.3 | There is insufficient policy compliance. | A system is in place to instill policy understanding and compliance. | Train IM/IT staff in the value of policy compliance. |
| | 4.4 | There is insufficient coordination between the DOIM and the WRAMC chain of command. | A system is in place whereby IM/IT issues have appropriate and timely access to the WRAMC chain of command. | Address all IM/IT priorities at WRAMC command meetings. |
| | 4.5 | There is insufficient partnering with intra- WRAMC consultative and advisory groups. | A system is in place to ensure that IM/IT access WRAMC advisory groups for consultation leading to top-quality policy directives. | Cultivate WRAMC opinion leaders. |
| | 4.6 | There is incomplete promotion of interpersonal and intra-group communication among WRAMC IM/IT opinion leaders. | A system is in place whereby DOIM conducts regular, interpersonal communication exercises with small groups of IM/IT employees. | Support Consideration of Others (CO2) training and implement a total quality management (TQM) program. |
| | 4.7 | There are inadequate IM/IT policies. | Policies are in place to and enforced that facilitate streamlined IM/IT functional operations and internal/external cooperation and collaboration. | Formulate and enforce IM/IT policies that attend to needs analysis and results of environmental scan. |
| | 4.8 | Incoherent policies are not well supported by WRAMC IM/IT employees. | A system is in place to encourage IM/IT employees to become well acquainted with finely tuned IM/IT policies and be motivated to follow them. | Train all IM/IT employees on IM/IT policies and the underlying rationale of these policies. |
| | 4.9 | There is incomplete communication and little closure between WRAMC IM/IT employees. | A system is in place to allow IM/IT employees to vent their true feelings and engage in constructive dialogue to improve workplace conditions. | Train all IM/IT employees on communication skills and encourage all IM/IT employees to practice these skills. |
| | 4.10 | There is insufficient consideration given to all WRAMC views by IM/IT leadership concerning policy development, implementation, enforcement, and promulgation. | A system is in place, which makes of IM/IT policy development, implementation, and promulgation a group effort of interested parties in WRAMC. | Implement a well-crafted sample of opinion leader views and use the results to improve IM/IT performance. |

| | | CURRENT STATE | DESIRED STATE | GAP |
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| 5 Integration of FunctionsCollecting, consolidating, and managing medical information relevant to the medical mission and the military readiness | | | al mission and the military readiness mission | |
| | 5.1 | garrison IM/IT autonomy confuses and constricts WRAMC, DACH, and KACH IMO | A system is in place whereby beneficiaries and providers in WRAMC, DACH, and KACH benefit from local needs recognition and WRHCS economies of scale. | Catalog current IM/IT projects and programs in WRAMC. |
| | 5.2 | Results of regularly scheduled meetings and workgroups often fail to provide satisfactory collaboration among management/ technical needs. | A system is in place to leverage collaborative efforts of leaders and planners to incorporate environmental scanning into prioritization of acquisitions/deployments. | Identify collaborative efforts among WRAMC subunits and leverage IM/IT priorities/principles. |
| | 5.3 | development leaves intermittent choke points resulting in critical system bandwidth | A system is in place to ensure that integrated WRAMC LAN capacity planning provides stable critical system throughput support of 1000 MBS and that automates analysis and repair of choke points. | Identify and capitalize on economies of scale in connection with the LAN/WAN development. |
| | 5.4 | landline/wireless development leads to missed opportunities for real-time | A system is in place to advance customer service by means of seamless telecommunications combining land and wireless telephony, computing, and paging technologies. | Encourage close cooperation and collaboration of IM/IT practitioners of formerly disparate technologies in a results-oriented environment. |
| | 5.5 | Incomplete resolution of management and technical priorities results in a low level of customer satisfaction with IM/IT products and services. | A system is in place to ensure collaborative WRAMC leader development, mentoring of SME, and technical training of IM/IT users. | Facilitate understanding and team building among WRAMC partners, both inside and outside of IM/IT. |
| | 5.6 | IM/IT manager-technician misperceptions and misunderstandings result in inadequate worker coordination and poor customer expectations. | A system is in place to encourage IM/IT manager- technician collaboration, which adds to high quality IM/IT reputation among WRAMC customers. | Stimulate liaisons with IM/IT intra-WRAMC consultation organizations. |
| | 5.7 | adequately recognize IM/IT personnel and technical value. | A system is in place to consistently recognize achievement by appropriately awarding IM/IT personnel. | Increase the distribute of awards and commendations to deserving IM/IT employees. |
| | 5.8 | Many IM/IT projects and meetings lack sufficient structure to specify functional requirements and technical objectives. | A system is in place to structure and support WRAMC IM/IT projects and meetings with functional and technical products and electronic audit trails. | Upgrade and support informatics efforts, which integrate business processes, functional requirements, and IM/IT technical opportunities. |
| | 5.9 | Certain IM/IT systems do not have current hardware/software maintenance contracts. | Each IM/IT system is maintained by a reputable vendor, whose service is enforced by strict specification of contract duties and whose contract is regularly reviewed. | Identify and capitalize on quality and economies of scale pertinent to LAN/WAN maintenance and development vendors. |

| | | CURRENT STATE | DESIRED STATE | GAP |
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| 6 | Reso | urcesOptimizing resource utilization. | | |
| | | Current IM/IT requirements are not sufficiently communicated. | A policy is enforced whereby IM/IT information flow provides efficient and effective closure. | Make all IM/IT information updates available to DOIM managers and planners as part of an enforced information policy. |
| | | Current IM/IT resources are not sufficiently inventoried. | A system is in place whereby IM/IT resources can be automatically inventoried on a periodic basis. | Conduct weekly IM/IT resource inventory. |
| | | Investment in IM capabilities throughout WRAMC, WRHCS, and NARMC is not accurately coordinated. | A flexible and adaptive acquisition strategy has been established and implemented. | Implement and enforce a coordinated IM/IT acquisition strategy and policy. |
| | | Available resources are not adequately correlated with project needs. | A system is in place whereby available resources can be efficiently correlated with project needs. | Correlate available resources with project needs |
| | 6.5 | Asset acquisitions are not adequately correlated with project needs. | A system is in place whereby resource acquisitions can be efficiently correlated with project needs. | Correlate resource acquisition with project plans and charters. |
| | | Projects and needs are not correctly prioritized. | A system is in place whereby projects and needs can be effectively categorized and prioritized. | Prioritize automation projects and requirements. |
| | 6.7 | Resource utilization is not currently tracked. | A system is in place whereby each resource utilized can be tracked IAW its life cycle. | Track resource utilization IAW the life cycle of each IM/IT project. |
| | 6.8 | The IM/IT acquisition program has not been regularly assessed to determine whether it responds to changing business practices and requirements. | A system is in place whereby the IM/IT acquisition program can be periodically assessed and evaluated to ensure that it responds to the changing market place. | Assess the IM/IT acquisition program weekly. |
| | | WRAMC requirements for performance metrics are not being consistently well met. | A system is in place whereby data to meet WRAMC requirements for performance metrics can be automatically collected, stored, and analyzed on a periodic basis. | Collect, store, and analyze performance metrics each month as advised by the Strategic Planning Activity (SPA). |
| | | It is unknown to any degree of certainty whether the IM/IT program meets emerging WRAMC needs. | BPR initiatives are systematically conducted on a periodic basis to ensure that the IM/IT program meets emerging WRAMC needs. | Conduct business process re-engineering (BPR) initiatives to ensure resource management (RM) effectiveness |

SCOPE OF ACSIM IM/IT MISSION SUPPORT BEYOND WRAMC

In addition to WRAMC IM/IT support, the WRAMC DOIM supports the Walter Reed Health Care Systems (WRHCS), North Atlantic Regional Medical Command (NARMC), TRICARE, and Medical Health Services (MHS) mission throughout the National Capitol Area (NCA). WRAMC DOIM provides technical and consultative assistance to DeWitt Army Community Hospital (DACH), Fort Belvoir, VA; and Kimbrough Army Community Hospital (KACH), Fort Meade, MD as well as their respective satellite clinics.

ACSIM provides direction to the WRAMC IMO and to the IMO of DeWitt and Kimbrough hospitals and their satellite clinics. WRAMC IM/IT managers assist IMO to identify, coordinate and leverage current collaborative efforts to identify/capitalize on economies of scale and to interlock budgetary planning with resource utilization. WRAMC resource management provides consultant assistance to NARMC, and TRICARE/tri-service leadership. WRAMC DOIM Clinical Information Systems Branch (ISB) works with the Clinical Information Technology Program Office (CITPO).

LAWS AND REGULATIONS WHICH DICTATE IM/IT PROCESSES

The Information Technology Management Reform Act (Clinger/Cohen Act) Division S1124, 104th Congress, 1996 National Defense Authorization Act Division E establishes responsibility for acquisitions of information technology in the ACSIM/DOIM. The revised AR 25-1 includes policies to implement the Clinger-Cohen Act and the Executive Order 13011, Federal Information Technology. DA Pamphlet 25-1-1 provides procedures to implement AR 25-1. This pamphlet incorporates new procedures and best practices in managing information at the operational level. OSI 9000 is the IM/IT industry standard which inculcates the reason for standard IM/IT components and operations.